

Key Health Indicators: Information That Works

The Washington Legislature, as part of the PHIP, directed the Department of Health to look for “the key health outcomes sought for the population” in the great volume of health information it collects. To do this, the PHIP Key Health Indicators Committee has focused its work on a deceptively simple question: How healthy are we?

In the first phase of work during 1999-2001, the committee identified indicators for these sought-after outcomes. It used an approach that focused primarily on modifiable *determinants* of health and well-being (see page 16). It developed a minimal set of indicators designed to give a big picture look at major determinants of health in Washington, including physical and social environments, health care, and health behaviors. The indicators, taken together, create a “Report Card on Washington’s Health.”

The Report Card (shown on page 17) provides a framework to disseminate timely data and communicate with the public about the health and well-being of Washington residents. It is a unique approach to monitoring the health of a state because it is concise, it is designed for use by both health policy makers and the general public, and it attempts to address the full scope of factors that determine health—that is, it generally measures *health* rather than *illness*.

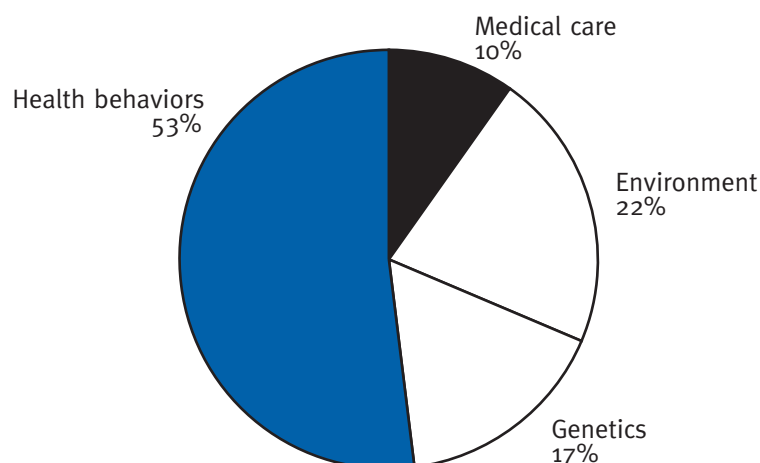
While the Report Card is intended to provide an overall context for health in Washington, a single indicator, by itself, cannot provide a picture of the complex and subtle nature of the real world. Developing this picture requires understanding the scientific evidence about what causes an indicator to be high or low; it requires viewing each indicator in relation to other indicators; and it requires delving more deeply into each indicator to see if there are disparities in the level of the indicator for people from different race and ethnic groups, with different levels of income or education, living in different geographic areas, or with differences in other less easily determined factors.

For example, the indicator for “Are we physically active?” tells us whether our physical activity levels are high or low, but it does not tell us why we are active or inactive. To understand why, we need to consider the social, economic, cultural, and personal contexts that encourage or create barriers to physical activity. Likewise, an indicator of access to health care, by itself, cannot describe the relationship between use of preventive services and cultural appropriateness of health care or trust in receiving high-quality health care regardless of race, ethnicity or economic status. The Report Card is intended to trigger community dialogue and action by identifying key health issues and encouraging community



Key Health Indicators Chairs Jac Davies (Assistant Secretary of Health) and Ward Hinds (Director, Snohomish Health District) have led work to set measurable health indicators so that the state will be able to answer not only the question, “How healthy are we?” but also in the future, “How healthy do we want to be?”

What Determines Our Level of Health?



Source: "Ten Leading Causes of Death in U.S.," U.S. Centers for Disease Control and Prevention, 1975

leaders and policy makers to delve deeper into the background context for those issues and then to develop policies and programs that will truly protect and improve the health of Washington's residents.

The committee circulated the draft Report Card among different types of users—including business, community groups, and health care organizations—and incorporated their comments in the final indicator set it approved in 2001. The Department of Health has begun compiling statewide data for the Report Card measures (see Appendix 3). The committee has also identified local, national, and international data sources. Other current committee work includes establishing the frequency of data analysis and dissemination, identifying new data sources, and sharing best practices associated with each indicator.

The Report Card provides the short answer to "how healthy are we?" The Department of Health presents a more detailed answer in *The Health of Washington State*, a compendium of data, trends, disparities, and potential interventions for significant health issues. This document, published during Summer 2002, is available on the web (see box).

Even with stable frameworks in place to collect, organize, and share health information, the Key Health Indicators Committee has encountered barriers to collecting some data. Several of the original indicators were adjusted to fit available data. Thus, we measure the number of *times* people eat fruits and vegetables each day, not the number of *servings* per day. We measure compliance of relatively large public water systems for a limited array of contaminants instead of all public water

systems and all regulated contaminants. Data for other indicators were missing altogether, but the committee has worked to modify existing data systems to make sure that this information is available in the future.

Collection of community-level data has also emerged as a limitation. Some of the indicator data are currently not available at the community (county or smaller geography) level. Nonetheless, this information is needed for communities and the state to document problems, develop and implement interventions, and evaluate program

For more information about Key Health Indicators:

The Health of Washington State

<http://www.doh.wa.gov/HWS/default.htm>

VISTA Public Health Data

<http://www.doh.wa.gov/OS/Vista/homepage.htm>

PHIP Key Health Indicators Committee Page

<http://www.doh.wa.gov/phip/Indicators.htm>

Community Guide to Preventive Services

http://www.thecommunityguide.org/home_f.html

Coalition for Healthier Cities and Communities and the International Healthy Cities Foundation

<http://www.healthycommunities.org>

effectiveness. A good short-term solution has emerged that will allow county-level data for questions included on the Behavioral Risk Factor Surveillance System, which provides data for 8 of the 19 measures on the Report Card. But we need to pay additional attention to sustaining this valuable resource. Without local level data, Washington's Health Report Card is unlikely to generate local level action or to affect public views about health.

The Key Health Indicators Committee is also developing an action guide for local public health

agencies, community organizations, businesses, schools and others to use in their communities to implement the Report Card and share best practices. The guide will give examples of ways individuals, organizations, and communities can positively influence the status of these indicators. This dissemination is critical if the Report Card is to engage and inform public policy makers, to help them make good decisions, to measure the progress of and allow comparisons between communities, and—most important—improve the health status of all who live in Washington State.

Report Card on Washington's Health—"How healthy are we?"

General Health Status:

Years of healthy life

Emotional well-being

Healthy child development

Health Determinants:

How safe and supportive are our surroundings?

How safe are our food, water, and air?

- ◆ Illnesses commonly associated with unsafe food, unsafe water, or poor hygiene
- ◆ Safe drinking water
- ◆ Air quality

How safe and supportive are our communities?

- ◆ Economic:
 - Percent below poverty threshold
- ◆ Social connectedness:
 - Civic involvement/interpersonal trust
 - School retention rates
- ◆ Injuries and violence:
 - Unintentional injuries
 - Domestic violence
 - Child abuse and neglect
 - Violent crimes

How supportive is our health care system?

- ◆ Access to health care
- ◆ Vaccine-preventable diseases

How healthy are our behaviors?

Do we smoke cigarettes?

- ◆ Percent non-smokers

Do we eat fruits and vegetables?

- ◆ 5 fruits and vegetables a day

Are we physically active?

- ◆ 30 minutes a day, 5 times a week

Do we abuse alcohol?

- ◆ 5+ drinks on one occasion during last month

Recommendations for 2003-2005

1. Improve and sustain the availability of community-level data by enhancing and supporting data collection systems that allow community-level analyses.

Meaningful information on health is specific for a community or group of people. When health data accurately describe the threats, behaviors, or opportunities that apply to you and your community, they provide a basis for action on local priorities and a basis for charting progress over time.

2. Develop a systematic process for collecting and publishing the Report Card data and examples of interventions, including collection and dissemination of data that can be used for communities and subgroups, such as race or ethnic groups or urban and rural residents.

Health improvement is a long-term strategy and must be sustained over time. Effective investments in health improvement must be supported by a continuous cycle of evaluation, measurement, and reporting.

3. Distribute the Report Card and action guide widely. Encourage public and private organizations to use the Report Card as they allocate resources and develop work plans to improve health outcomes.

Incorporate the Key Health Indicators into existing report cards. The health of all people in Washington depends on the actions of many partners, including public and private sectors, health care providers, and a broad range of community organizations. The Report Card provides all of them with opportunities to focus on innovative efforts that can result in better health, whether through health care, education, social support, or environmental changes.

4. Set numerical targets for the indicators that address the question, “How healthy do we want to be?”

Setting realistic numerical targets for health indicators, based in evidence from the best available science, will let us measure progress over time. Numerical measures will provide a clear picture of how healthy we are and where we are gaining—or losing—ground.